

POSITION	ID NO.	DATE
CLASSIFIER	7	5-11-87
EXAMINER	U35	6-3-93
TYPIST	CSO	5-16-93
VERIFIER	CSO	7-15
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
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41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

SYMBOLS

✓ Rejected

○ Allowed

- (Through numeral) Canceled

N Non-elected

I Interference

A Appeal

O Objected

Claim	Date
Final	
Original	
51	
52	
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